

	Health and Well-Being Board 13 November 2014
Title	Health and Well-Being Priorities for 2015-20
Report of	Director of Public Health Strategic Director for Communities
Wards	All
Date added to Forward Plan	September 2014
Status	Public
Enclosures	None
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<h2>Summary</h2>
<p>The Health and Well-Being Board is required by the Health and Social Care Act (2012) to produce a Joint Strategic Needs Assessment (JSNA) and a Health and Well-Being Strategy (HWBS). The existing Joint Strategic Needs Assessment covers the period 2011 – 15, and the Joint Health and Well-Being Strategy covers the period 2012 – 15. Both are due to be updated.</p> <p>This report sets out the process for the Joint Strategic Needs Assessment and Health and Well-being Strategy updates including timescales; roles and responsibilities; resource requirements; quality assurance and on-going monitoring. The Joint Strategic Needs Assessment will be used to inform the joint Health and Wellbeing Strategy which, in turn, will drive local commissioning decisions.</p> <p>The report also considers the outcomes from the Health and Well-Being Board away day in September 2014 which are relevant to both the JSNA and HWBS updates.</p>

Recommendations

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| 1. That the Health and Well-Being Board comments on and approves the approach to updating the Joint Strategic Needs Assessment and Joint Health and Well-Being Strategy. |
| 2. That the Health and Well-Being Board approves the proposals to establish a Steering Group to oversee the JSNA/ HWBS updates. The Health and Well-Being Board is asked to note, when approving this recommendation, that this Steering Group has a distinct set of roles and responsibilities to the 3 standing sub-groups of the Board (set out in para 1.5) |
| 3. That the Health and Well-Being Board appoints membership to the JSNA and HWBS Steering Group. |
| 4. That the Health and Well-Being Board approves the recommendations from the Health and Well-Being Board away day (set out in Section 1.10) and implements these recommendations immediately. |

1. WHY THIS REPORT IS NEEDED

- 1.1 Local Authorities and Clinical Commissioning Groups (CCGs) have equal and joint duties to conduct a Joint Strategic Needs Assessment (JSNA) and produce a Joint Health and Well-Being Strategy (HWBS) through the Health and Well-Being Board, as outlined in the Health and Social Care Act 2012. Barnet's JSNA and HWBS are due to be updated in 2015.
- 1.2 The Joint Strategic Needs Assessment (JSNA) is an on-going process by which Local Authorities, Clinical Commissioning Groups and other public sector partners jointly describe the current and future health and well-being needs of their populations and identify priorities for action.
- 1.3 Updating the JSNA and the joint Health and Well-Being Strategy (HWBS) over the coming months will allow decisions about health and social care to be made on the basis of clinical expertise, evidence, valuable input of elected councillors, and the public via local Healthwatch and wider engagement with The Community.
- 1.4 The JSNA and HWBS are the foundations upon which Health and Well-Being Boards base their shared leadership across the wider determinants that influence improved health and well-being.
- 1.5 This report seeks approval to establish a time limited, task specific Steering Group to support the updates of the JSNA and HWBS. This group will have distinct roles and responsibilities to the 3 other standing sub-groups of the Health and Well-Being Board: the Financial Planning Group, led by the CCG Chief Officer and the LBB Strategic Director for Communities (the joint commissioning executive for children and adults service provision); the Health and Social Care Integration Board, led by the Director of Adult Social Services (the collective of providers who support the design and delivery of health and social care integration in Barnet); and the Early Year's Sub-Group, led by the Director of Children's Services and Director of Public Health (the multi-agency group responsible for taking forward early years and children's health and

well-being priorities delegated from the Health and Well-Being Board/ Children's Trust Board/ Children and Young People's Plan).

1.6 What is the process for updating the JSNA and HWBS?

Local areas are free to undertake JSNAs in a way best suited to their local circumstances – there is no prescribed template or a format that must be used and no mandatory data set to be included¹. In Barnet, it is proposed that a Steering Group will be established to ensure that the delivery of the JSNA and HWBS is on track and the process is collaborative. The Director of Public Health will act as the project sponsor and will champion the importance of the JSNA and HWBS across all partners. Project Management capacity will be secured to support the development of the refreshed JSNA and HWBS, although it is expected that service data and insight leads from within the Council and CCG together will contribute to the development of the JSNA refresh.

1.7 How the updated JSNA and HWBS will fit together in Barnet

The HWBS will draw on the evidence gathered from a number of sources including views and feedback of stakeholders, users and communities, analysis of the HWBS performance report together with the priorities and needs identified within the updated JSNA. The Health and Well-Being Board completed an exercise at the Away Session in September 2014 to define the strategic principles that should underpin its work, and the updates of these strategic documents. A write up of this session is captured below:

The Health and Well-Being Board should ensure it works at all times to:

- **Design a clear health and care system that is:**
 - **Owned and understood by partners**
 - **Owned and understood by the public, enabled by good communication and engagement**
 - **Clear about eligibility and entitlements – i.e. the “deal”**
- **Build system credibility and confidence with the public and partners**
- **Prioritise the attainment of healthy, not necessarily longer lives**
- **Make “conscious connections” with agencies who sit outside of health and social care e.g. work and education**
- **Develop an integrated focus on the early years (to include Health Visiting, Early Years, and Schools)**
- **Consider a full lifecycle with 1) prevention/ wellbeing/self-care and 2) frailty/ complex needs/ exclusion as the two framing “goal posts”**
- **Encourage the growth of personal and community responsibility working with public services**

¹ Department of Health (2013) Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/223842/Statutory-Guidance-on-Joint-Strategic-Needs-Assessments-and-Joint-Health-and-Wellbeing-Strategies-March-2013.pdf. Last accessed 23/10/14.

These principles will inform the updates of the JSNA and HWBS.

Synthesis of the JSNA analysis and research and consultation and engagement work will be translated as clear outcomes in the Strategy that will feed into commissioning decisions across local services to tackle the factors that impact upon health and well-being across service boundaries.

The updated HWBS will be a 5 year strategic document that will align with the Council and CCG's strategic planning cycles, and will take account of the Public Health Commissioning Plan, the LBB Adults and Safeguarding Committee Commissioning Plan, the CCG strategic and delivery plans, the Children, Education, Libraries and Skills Committee Commissioning Plan, the health objectives in the Children and Young People's Plan that the Health and Well-Being Board now has responsibility for, as well as Public Health England's strategic priorities, the Secretary of State for Health's mandate for the NHS and information from resident feedback.

1.8 ***What are the timelines for updating JSNA and HWBS?***

The table below outlines the proposed timelines of the JSNA and HWBS update process during 2014-15

HIGH LEVEL TASKS	TIMELINES
High level approach to updates agreed by Health and Well-Being Board	November 2014
Steering Group established	November 2014
Review of current JSNA and update requirements	November - December 2014
Engagement and consultation with stakeholders -JSNA	January-March 2015
JSNA completed and signed-off through HWBS and priorities identified.	March 2015
Engagement and consultation with stakeholders – HWBS	March-May 2015
HWBS completed	June 2015
Engagement - Health and Well-Being Board and Partnership Boards summit – review of HWBS	June 2015
Final amendments and sign-off of HWBS	June – September 2015

1.9 ***How will we know that the updates have been successful?***

The JSNA is a progressive and iterative long-term process not just a one-off document. It is a continuous process of developing local evidence-based priorities for commissioning. The result should be a needs assessment that encompasses the factors that influence the health and well-being of the residents of the borough.

A successful JSNA will:

- Help to enable the Council, CCG and wider partners to make plans and decisions to improve health and well-being outcomes
- Help to enable commissioners to make plans to address persistent health inequalities, to generate solutions for unmet needs, highlighting what services are needed and where and how best to deliver them
- Guide decisions around where to invest or reduce spending
- Inform commissioning of health, well-being and social care services within local authority areas
- Present the need in a way that is understandable and informs the HWBS
- Reflects the knowledge and understanding of the local stakeholders, users, voluntary and community groups
- Help driving improved evidence in areas where it has been poor in the past
- Help providers to focus their service provision

It should be noted that a successful product is dependent on breadth and quality of engagement across partners and stakeholders as well as the availability, accessibility and quality data and intelligence.

The HWBS update will be informed by the JSNA.

A successful HWBS will:

- Be developed and delivered by the whole Health and Well-Being Board – with shared responsibility
- Respond to the priorities identified in the JSNA
- Build on what has been done and what has worked
- Is reflected in the health and social care commissioning plans for the borough of NHS England, CCG and the Council.
- Help to agree collective action across Health and Well-Being Board and wider partners to deliver outcomes for the population
- Avoid seeking to take action on everything at once, setting a small number of key strategic priorities for action that will make a real impact on people's lives.
- Tackle problems with evidence-based action to an appropriate scale
- Be transparent and accountable (provides clear measures of progress to hold the Board and its partners to account over time Include a summary of community views and how they have been used and how concerns can be raised with the Board)

1.10 ***On-going arrangements to maintain and update the JSNA and to monitor progress of HWBS***

The Joint Strategic Needs Assessment should be thought of as a continuous process rather than one off product. Needs assessments will be required in particular areas as a result of changing strategic priorities or the availability of intelligence. The steering group will review arrangements for ongoing needs assessments ensuring that a clear process is defined for further work.

Progress to deliver on the HWBS will be monitored via a performance framework that will:

- Outline some key actions and measures for each of the strategic intentions.
- Identify responsible leads and contributors for each strategic intention.

The framework could be used by the Board to receive regular updates against the key priorities on a rolling basis. The framework will also consider other methods of judging success such as qualitative feedback from key stakeholders and benchmarking against similar authorities.

The draft performance framework will be bought back for the Health and Well-Being Board to review in May 2015, contained within the draft Strategy.

1.11 **Business processes that will support the Health and Well-Being Board to deliver its strategic objectives**

The Health and Well-Being Board away session asked partners to share their organisations' aspirations for the future, consider the Board's strategic priorities and challenges, and prioritise some practical actions that it would set in motion following the session so that working practices support rather than inhibit achievement of strategic priorities. At the session, the Board recognised that it is the one Committee that draws together health and well-being strategy across the system in Barnet. The Board set a number of priority actions that they resolved to take forward to support delivery of their key objectives:

- Establish sessions for Health and Well-Being Board members outside of formal Board meetings to address 'wicked issues' and plan approaches to resolution that can be debated and agreed at formal meetings
- Develop the forward work programme so that it shows the pathways between Committees/Boards to the Health and Well-Being Board for linked work programmes
- Ensure this forward work programme links to endorsement and implementation processes for individual member organisation's of the Health and Well-Being Board
- Produce an accompanying annual consultation timetable, based on the forward work programme, and factoring in the process for updating the JSNA/ HWBS
- Determine how best to engage with NHS England when they cannot be present at Board meetings, including use of creative outreach and liaison if Health and Well-Being Board attendance not possible; and pre- and post-meeting briefings

- Develop a shared capacity plan between partners to deliver the Health and Well-Being Board “system”– including commissioning teams; finance; support

The Health and Well-Being Board is asked to approve and implement these recommendations.

2. REASONS FOR RECOMMENDATIONS

2.1 The process outlined will ensure that:

- The JSNA and HWBS update is delivered by agreed deadlines.
- The process and the product(s) of JSNA and HWBS are quality assured.
- All partners are fully engaged in the development of the JSNA and HWBS.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 Traditionally JSNAs have often been intelligence products of Public Health teams. The preferred option has been selected in recognition that there are shared statutory responsibilities for Joint Strategic Needs Assessment and strategy and that collective engagement, ownership and action is needed to deliver system wide change.

4. POST DECISION IMPLEMENTATION

4.1 The decision will be implemented immediately through establishing a Steering Group to ensure the delivery of the JSNA and HWBS.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

5.1.1 As an important tool for commissioning the updated JSNA will be used to inform the future joint HWBS, which, in turn, will drive local commissioning decisions. By improving local knowledge base and providing analysis of local issues JSNA also informs other key strategies in the Borough.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

5.2.1 The approval of the approach will have no direct resource implications. Any project management costs will need to be met within existing resources within the Council.

5.2.2 It is critical that a variety of staff and wider strategic partners are involved and contributed to the process as part of their daily business.

5.2.3 The Council was successful in bidding for some funding from London Councils to support the Health and Well-being Board development. £3,750 from this budget has been set aside to support consultation and engagement in relation to the JSNA and HWBS updates. A detailed consultation and engagement proposal will be included in the delivery plan, to be produced by the Project Manager once appointed.

5.3 Legal and Constitutional References

5.3.1 Section 196(1) The Health and Social Care Act 2012 required that functions of the Clinical Commissioning Groups (CCGs) and Local Authorities of preparing a JSNA and a HWBS be discharged by the Health and Well-Being Board.

Local Authorities, CCGs and NHS England must regard to these documents when exercising their functions.

5.3.2 The Council's Constitution sets out the Terms of Reference for the Health and Well-Being Board. The responsibilities include agree a HWBS for Barnet taking into account the findings of the JSNA and performance managing its implementation to ensure that improved outcomes are being delivered. The Terms of Reference also sets out responsibilities of the Board to work with partners across health social care agencies to ensure that resources are directed to meet the needs of Barnet's population.

5.4 Risk Management

5.4.1 Risks to the development of JSNA and HWBS and quality assurance will be controlled by the following:

- Leadership (Project Sponsor and the Steering Group)
- Project Management
- Governance arrangements
- Peer review via an external consultant
- Engagement and communication

5.4.2 The delivery plan will contain a risk register with mechanisms for monitoring and managing risk.

5.5 Equalities and Diversity

5.5.1 The individual needs assessments will benchmark Barnet against England and London and where possible provides more local analysis. This will be done with respect to equalities, for example, age and gender specific rates if data supports this level of analysis. If data is available to cover disability, then this will also be included. However, it must be noted that, for the majority of datasets, equalities groups are not recorded and therefore they do not support this analysis.

5.6 Consultation and engagement

5.6.1 It is crucial that the JSNA and HWBS are not seen as a product but more importantly seen as a process where relationships are developed around the needs of the population to inform local commissioning. The entire JSNA and HWBS updates process requires and develops local engagement.

5.6.2 The Statutory Guidance on JSNA and HWBSs² suggests that Health and Well-Being Boards must involve Healthwatch and the local community including voluntary organisations that represents specific groups as they can bring great value to the process via being a 'critical friend'.

5.6.3 The Board will engage these groups through:

- The Health and Well-Being Board and the Partnership Board's Autumn

² Department of Health (2013) Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/223842/Statutory-Guidance-on-Joint-Strategic-Needs-Assessments-and-Joint-Health-and-Wellbeing-Strategies-March-2013.pdf. Last accessed 231014.

Catch Up event on 20th November 2014 where the plans for the JSNA update and Health and Well-Being Strategy year two performance report will be discussed

- The Health and Well-being Board and the Partnership Board's Summit in June 2015 where the draft JSNA and HWBS will be consulted.

5.6.4 Other local partners such as Police, youth justice services, troubled families co-ordinators, local authority housing, planning, leisure, environmental health, education, schools and Department for Work and Pensions teams will be asked to engage as specialist experts as and when appropriate by the Steering Group.

5.6.5 Further plans on consultation and engagement will be outlined as part of the Steering Group's delivery plan. The plan will also include engagement with service providers from the NHS, voluntary and/or private sector as they hold a wealth of information in relation to local needs.

6. BACKGROUND PAPERS

Feedback from the Barnet Health and Well-Being Board Away Day, September 2014 (available on request from 020 8359 3478).